2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000026371

Entity Name: SALON @ 220 LLC

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2572 CR 220 - SUITE 1 2572 CR 220 - SUITE 1

VILLAGE SHOPPES AT DOCTORS INLET

WILLAGE SHOPPES AT DOCTORS INLET

MIDDLEBURG, FL 32068

VILLAGE SHOPPES AT DOCTORS INLET

MIDDLEBURG, FL 32068

US

MIDDLEBURG, FL 32008 MIDDLEBURG, FL 32008

Current Mailing Address: New Mailing Address:

2572 CR 220 - SUITE 1 2572 CR 220 - SUITE 1 VILLAGE SHOPPES AT DOCTORS INLET VILLAGE SHOPPES AT DOCTORS INLET

MIDDLEBURG, FL 32068 US

FEI Number: 83-0415348 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

REBAR, SHARON 2572 CR 220 - SUITE 1 VILLAGE SHOPPES AT DOCTORS INLET MIDDLEBURG, FL 32068 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete Title: MGRM () Change (X) Addition

 Name:
 Name:
 REBAR, SHARON MGRM

 Address:
 Address:
 2572 CR 220 - SUITE 1

 City-St-Zip:
 City-St-Zip:
 MIDDLEBURG, FL 32068 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SHARON REBAR MGRM 04/28/2006